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<i>Effective on 12/08/2004.</i> Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		<i>Complete If Known</i>	
FEES TRANSMITTAL For FY 2009		Application Number	10/550,545-Conf #1930
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	June 19, 2006
TOTAL AMOUNT OF PAYMENT (\$ 490.00)		First Named Inventor	Stephen THOMSON
		Examiner Name	J. E. McDonough
		Art Unit	1793
		Attorney Docket No.	0446-0180PUS1

METHOD OF PAYMENT (check all that apply)					
<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 02-2448				Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input checked="" type="checkbox"/> Charge fee(s) indicated below			<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17			<input checked="" type="checkbox"/> Credit any overpayments		

FEES CALCULATION									
1. BASIC FILING, SEARCH, AND EXAMINATION FEES									
<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>			<u>Fees Paid (\$)</u>	
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>		
Utility	330	165	540	270	220	110			
Design	220	110	100	50	140	70			
Plant	220	110	330	165	170	85			
Reissue	330	165	540	270	650	325			
Provisional	220	110	0	0	0	0			
2. EXCESS CLAIM FEES									
<u>Fee Description</u>								<u>Small Entity</u>	
Each claim over 20 (including Reissues)								52	26
Each independent claim over 3 (including Reissues)								220	110
Multiple dependent claims								390	195
<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>					
12 - 20 or HP	x	=		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>				
HP = highest number of total claims paid for, if greater than 20.									
<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>						
1 - 3 or HP	x	=							
HP = highest number of independent claims paid for, if greater than 3.									
3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(g).									
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>					
_____ - 100 =	/50 =	(round up to a whole number) x	=						
4. OTHER FEE(S)									
Non-English Specification, \$130 fee (no small entity discount)								<u>Fees Paid (\$)</u>	
Other (e.g., late filing surcharge): 1252 Extension for response within second month								490.00	

SUBMITTED BY			
Signature			Registration No. (Attorney/Agent) 40,069
Name (Print/Type)	MaryAnne Armstrong, Ph.D. #58,387		Telephone (703) 205-8000
Date	August 7, 2009		